



Vapor Tightness Vapor Form

Barge Owner / Company: REINAUER TRANSPORTATION Date of Test: 5/3/18
 Owner Address: 1983 Richmond Terrace City Staten Island State Ny. Zip 10302
 Barge Name: RTC 104 Official No.: 1234439
 Test Type: Air Pressure: 27" Testing Location: VT Marine Pascagoula

Compartment ID	Total Volume of Product Tank bbls (V)	Lowest PVR setting (in. of H ₂ O) [P(I)]	Max Permitted Ldg. rate (bbls/hr) [L]	Type of Air Dry/Inert	Date PRV Pressure obtained	Test Pressure "I" (In. of H ₂ O)	Amount of Drop "D" (In. of H ₂ O)	Pressure Reading after 30 min. (in. of H ₂ O) [P(f)]	Pia= P(i)/27.7	P=P(i)-P(f)	PM=0.861 * Pia * L/V	If P≤PM, vessels tight
<i>Sample</i>	<i>20,000</i>	<i>41.5</i>	<i>12,000</i>	<i>Inert</i>	<i>8/20/10</i>	<i>41.5</i>	<i>0.7</i>	<i>40.8</i>	<i>1.5</i>	<i>.7</i>	<i>0.77</i>	<i>Tight</i>
1 Port	9300	27	10500	Dry	5/3/18	27.6	0	27.6	1	0	.97	Tight
1 Stbd.	9300	27		Dry		27.6	0	27.6	1	0	.97	Tight
2 Port	10800	27		Dry		27.6	0	27.6	1	0	.83	Tight
2 Stbd.	10800	27		Dry		27.6	0	27.6	1	0	.83	Tight
3 Port	10900	27		Dry		27.6	0	27.6	1	0	.82	Tight
3 Stbd.	10900	27		Dry		27.6	0	27.6	1	0	.82	Tight
4 Port	10700	27		Dry		27.6	0	27.6	1	0	.84	Tight
4 Stbd.	10700	27		Dry		27.6	0	27.6	1	0	.84	Tight
5 Port	10600	27		Dry		27.6	0	27.6	1	0	.85	Tight
5 Stbd.	10600	27		Dry		27.6	0	27.6	1	0	.85	Tight

List any leaks found or repairs made during annual vapor-tightness testing: _____

I certify that this vessel is vapor tight as required by 40 CFR 63.565 (c) (1) or EPA Method 21.

Name of Tester: Daryl Russell Tester's Signature: *Daryl Russell*

Tester's Title: Barge Superintendent Tester's Certification: _____

Witness if any: _____ Witness's Signature: _____